	PATENT A	PPLICATIO		RD	Application or Docket Number							
Effective October 1, 2000										1	-174	056
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL E	NTITY	OR	OTHER SMALL	
TOTAL CLAIMS			4				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		8.	8ASIC FEE 355.00		OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•		. [X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			9 minus 3 =		•			X40=		OR	XĆ0=	
MULTIPLE DEPENDENT CLAIM PRÉSENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						_	TOTAL	355	OR	TOTAL		
CLAIMS AS AMENDED - PART II										-	OTHER	
,		(Column 1) (Column 2) (Column 3						SMALL	ENTITY	OR I	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE,
	Total	3	Minus	/	0	=	lΓ	X\$:9=	1	OR	X\$18=	. //.
ME	Independent	• /	Minus		3	= /		X40=	/	OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	/	OR	+270=	/
BEST AVAILABLE COPY							L	TOTAL	<u> </u>		TOTAL	/
								ODIT. FEE	L	OR	ADDIT. FEE	
		(Column 1) CLAIMS			imn 2) HEST	(Column 3)	ר ו		ADDI-	ı		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	ABER OUSLY FOR	PRESENT EXTRA	╽Ĺ	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	= =:	=	┇┞	X40=		OR	X80=	
<u> </u>	FIRST PHESE	NTATION OF M	ULTIPLE DEF	ENDEN	I CLAIM		┚┟	+135=		OR	+270=	
							ــا م	TOTAL		OR	TOTAL ADDIT, FEE	-
		AL.	JUII. FEE			AUDIT. FEE						
		(Column 1) CLAIMS		HIG	imn 2) HEST MBER	(Column 3)	7 _		ADDI-	1		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	•• .		=		X\$ 9=		OR	X\$18=	
NE NE	Independent	•	Minus	•••		=	╽┞	X40=		00	X80=	
الا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR		
	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 									OR	+270=	
	If the entry in colu If the "Highest Nu "If the "Highest Nu The "Highest Nun	mber Previously F Imber Previously F	aid For IN THI Paid For IN TH	S SPACE	is less that is less that	ın 20, enter "20 an 3, enter "3."	~L	TOTAL DDIT. FEE d in the ap		OR	TOTAL ADDIT. FEE Humn 1.	

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